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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

| (a) Name of Individual, Organization or Corporation INDEPENDENT WOMEN'S VOICE | , | | | | |
|--|--|---|--|--|--|
| (b) Address (number and street) check if different than 1875 I Street NW 5th Floor | previously reported | | | | |
| (c) City, State and ZIP Code | | | | | |
| WASHINGTON DC 20006 | | 3. FEC Identification Number | | | |
| TO THE TOTAL | 20000 | 0 | | | |
| Occupation and Name of Employer (for Individual Filers Only) | | C C90011115 | | | |
| 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? No 5. COVERING PERIOD: FROM THROUGH | X 24-Hour Report 48-Hour Report Yes, it amends the report filed on | M / D D / Y Y Y Y | | | |
| TOTAL CONTRIBUTIONS TOTAL INDEPENDENT EXPENDITURES | | 0.00 | | | |
| Under penalty of perjury I certify that the independent expenditures reported h of, any candidate or authorized committee or agent of either, or any political | | n, or concert with, or at the request or suggestion | | | |
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM | _ | DATE lectronically Filed] | | | |
| Heather R. Higgins | Heather R. Higgins | 11/03/2014 | | | |
| | | | | | |
| NOTE: Submission of false, erroneous or incomplete informa | ation may subject the person signing this report | to the penalties of 2 U.S.C. §437g. | | | |

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination **Antietam Communications** 03 2014 11 Mailing Address 710 East Northway Lane Amount Zip Code City State 1000.00 Atlanta GΑ 30342 Transaction ID: F57.4501 MI Purpose of Expenditure Office Sought: ★ House Category/ State: 004 Script Writing Type Senate 06 District: President Name of Federal Candidate Supported or Opposed by Expenditure: FREDERICK STEPHEN UPTON X Support Check One: Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2014 2396.82 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Victory Media Group 11 03 2014 Mailing Address 2516 Waukegan Rd, #115 Amount City State Zip Code 17143.96 Glenview IL 60025 Transaction ID: F57.4496 KS Purpose of Expenditure Office Sought: House Category/ State: 004 Automated Phone calls Type Senate 00 District: President Name of Federal Candidate Supported or Opposed by Expenditure: PAT ROBERTS X Support Oppose Check One: Disbursement For: Primary General Calendar Year-To-Date Per Election 29009.65 2014 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Victory Media Group 2014 11 03 Mailing Address 2516 Waukegan Rd, #115 Amount State Zip Code City 1485.12 IL 60025 Glenview Transaction ID : F57.4497 Purpose of Expenditure Office Sought: MI House Category/ State: 004 Phone Banks Type Senate 01 District: President Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK X Support Check One: Oppose Disbursement For: 2014 Primary General Calendar Year-To-Date Per Election 3845.12 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures...... 19629.08 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

| AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE | | | | | | | |
|--|------------------|-------------------|---|------------|--------------------------------|---------------------|------------------------|
| INDEL ENDERN WOMENO VOICE | | | | | | | |
| Full Name (Last, First, Middle Initial) of Payer | ee | | | Date | of Public | Distribution | /Dissemination |
| Victory Media Group | | | | | M M / | D D / | y y y y y |
| Mailing Address 2516 Waukegan Rd, #115 | | | | I | 11 | 03 | 2014 |
| 2310 Waukegaii Nu, #113 | | | | Amo | unt | | |
| City | State | Zip Code | | | | | 1396.82 |
| Glenview | IL | 60025 | | Trai | nsaction | ID : F57.449 | |
| Purpose of Expenditure Phone Banks | | Category/ Type | 004 | Office Sou | ght: 🔀 | House Senate | State: MI District: 06 |
| Name of Federal Candidate Supported or O FREDERICK STEPHEN UPTON | pposed by Expend | liture: | | Check One | e: X | President Support | Oppose |
| Calendar Year-To-Date Per Election for Office Sought | | 13 | 96.82 | Disburseme | ent For: 2014 Other (spe | Primary | General |
| Full Name (Last, First, Middle Initial) of Paye | ee | | | Date | of Public | Distribution | /Dissemination |
| Victory Media Group | | | | | м = м / 11 | 03 | 2014 |
| Mailing Address 2516 Waukegan Rd, #115 | | | | Amo | | | 2011 |
| City | State | Zip Code | | | | | 2053.97 |
| Glenview | IL | 60025 | | Trar | saction | ID : F57.449 | |
| Purpose of Expenditure Phone Banks | | Category/ Type | 004 | Office Sou | ght: 🔀 | House Senate | State: NC 02 |
| Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS | | | Check On | e: 🔀 | President Support | District: Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | 20 | 53.97 | Disbursemo | ent For: 2014 Other (spe | Primary | General |
| Full Name (Last, First, Middle Initial) of Payee | | | Date of Public Distribution/Dissemination | | | | |
| M-T Address | | | | | M = M / | D | Y T Y T Y |
| Mailing Address | | | | A m a | unt | | |
| City | State | Zip Code | | Amo | uni | | |
| Oity | State | Zip Gode | | | | | |
| Purpose of Expenditure | | Category/ Type | | Office Sou | ght: | House | State: |
| Name of Federal Candidate Supported or O | nnosed by Evnond | | | | | Senate President | District: |
| Traine of Federal California Supported Of C | pposed by Expend | anule. | | Check One | e: | Support | Oppose |
| Calendar Year-To-Date Per Election | | Disburseme | ent For: [| Primary | General | | |
| for Office Sought | 7 | | | | Other (spe | ecify) ▶ | |
| (a) SUBTOTAL of Itemized Independent Exp | enditures | | | | 1 7 | | 3450.79 |
| (b) SUBTOTAL of Unitemized Independent E | xpenditures | | | ▶ | - T | | |
| (c) TOTAL Independent Expenditures(carry total from last page forward t | | | | | 1 7 | | 23079.87 |